



RCRA COMPLIANCE AND ENFORCEMENT BRANCH
ENFORCEMENT CASE RECOMMENDATION

Facility ID NUMBER: 9000746

FACILITY NAME: PEPCO Transformer Station
- Benning Road

CASE REVIEW OFFICER: Melissa Toffel

DATE: 07-18-07

FINDINGS OF INITIAL CASE REVIEW: Facility was inspected on June 15, 2007 by an EPA contractor. Upon review of the inspection report, no violations were noted.

DISPOSITION RECOMMENDATION: **CLOSE**

JUSTIFICATION FOR RECOMMENDATION: No Violations

CONCURRENCE SECTION

CASE REVIEW OFFICER *Melissa Toffel*

DATE: 7/18/07

UNIT COORDINATOR *[Signature]*

DATE: 7/19/07

ENFORCEMENT COORDINATOR *[Signature]*

DATE: 7/20/07

rec'd 6/28/07
6/27/07
jjs

RCRA Subtitle I Inspection Report

UST Compliance Inspection

Pepco Transformer Station – Benning Road
3400 Benning Road NE
Washington, DC 20010

Telephone Number: 202-872-2000

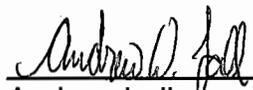
Date of Inspection: June 15, 2007

Facility Identification Number: 9000746

EPA Representative: Andrew Loll (Contractor), Chemical Engineer, 703-633-1645

Tank Owner: Potomac Electric Power Company

Tank Owner Representative: Fariba Mahvi, Lead Engineer, 202-331-6641



Andrew Loll

6/26/2007
Date

Background

On June 15, 2007, the United States Environmental Protection Agency (EPA), Region 3, Office of Enforcement, RCRA Compliance and Enforcement Branch, represented by its contractor, Andrew Loll of ERG, conducted a Compliance Evaluation Inspection (CEI) of the Potomac Electric Power Company (Pepco) Transformer Station located at 3400 Benning Road NE in Washington, DC to determine the extent of compliance with Subtitle I of the Resource Conservation and Recovery Act (RCRA).

Inspection Observations

Inspection Procedures. EPA Work Assignment Manager, Patricia Schwenke, contacted a representative of this facility on June 7, 2007 to schedule an inspection of the facility. Mr. Loll conducted the inspection on June 15, 2007. Upon arrival at the facility, Mr. Loll provided his credentials to Ms. Fariba Mahvi, Lead Engineer, and Dan Hume, Senior Engineer Associate. Mr. Loll explained the scope and purpose of the inspection to the facility representatives. After completing the inspection, Mr. Loll completed the Region 3 Underground Storage Tank (UST) Compliance Checklist, which is included as Attachment 1 to this report. Site management maintained all records on site.

Tank Descriptions. The Pepco transformer station has one UST (see Table 1), which stores transformer oil used to fill reconditioned transformer units in the adjacent shop. According to the facility's notification to the District of Columbia Environmental Health Administration, the tank is a double-walled steel with fiberglass reinforced plastic (FRP) tank. The tank was installed in January 1988. The tank contains a fill port. The tank supplies oil to the fill stations inside the shop via double-walled galvanized steel suction piping. See site diagram sketch in Attachment 1 and Photographs #1, #2, and #3 in Attachment 2 for a layout of the UST.

Table 1
Underground Storage Tank and Piping Details for the Pepco Transformer Station

| Tank No. | Material Stored | Capacity (gal.) | Installation Date | Tank Construction Material | Piping Construction Material |
|----------|-----------------|-----------------|-------------------|----------------------------|------------------------------|
| 1 | Transformer Oil | 15,000 | 1/88 | DW Steel w/FRP | DW Steel |

FRP – Fiberglass reinforced plastic.

DW – Double-walled

Tank Release Detection. Releases from the tank are detected by a Veeder-Root (VR) TLS-300C monitoring system that conducts Automatic Tank Gauging (ATG). Any UST

alarms appear on the VR system located in the transformer shop. During the inspection, the VR monitor stated that all functions were normal. The VR runs monthly 0.2 GPH leak detection tests. Attachment 3 contains ATG monitoring and leak detection testing records for the last 13 months. Attachment 4 contains a summary of the VR monitoring system certification inspection completed on July 22, 2006.

Piping Release Detection. Line tightness testing is conducted on the suction piping every three years by Petro Supply, Inc. The last test, completed on November 11, 2005, showed the piping was tight. Attachment 5 contains the last two line tightness testing results.

Spill/Overfill Prevention. The EPA inspector observed an overfill cutoff valve in the fill pipe for the tank. The EPA inspector observed a spill bucket during the inspection, which was in good condition, surrounding the fill pipe (see Photograph #4 in Attachment 2).

Cathodic Protection. The double-walled steel piping is cathodically protected by a sacrificial anode system. The system is tested every three years and the last test, indicating passing results, was completed on March 26, 2007. Attachment 6 contains the last three cathodic protection testing results. The test record from 2001 indicates a potential problem in the above ground piping inside the shop that was modified prior to the testing. The 2001 results indicate the cathodic protection system passed after the modifications.

Financial Assurance. The facility is insured through Associated Electric & Gas Insurance Services Limited with Policy #X2660A1A06. Attachment 7 contains proof of financial assurance.

Used Oil. The facility drains used oil into drums or above-ground storage tanks located in an adjacent building. The EPA inspector did not observe any signs of leaks or spills.

Attachments

1. Region 3 UST Compliance Checklist
2. Photo Log
3. ATG Inventory and Leak Detection Testing Reports
4. Veeder-Root Monitoring Certification Summary
5. Line Tightness Testing Results
6. Cathodic Protection Testing Results
7. Proof of Financial Assurance

Attachment 1. Region 3 UST Compliance Checklist

Leak Detection Inspection

| | |
|---|---|
| I. Ownership of Tank(s) | II. Location of Tank(s) |
| Potomac Electric Power Company 701 9th St NW (6th Floor) Washington, DC 20068 | Transformer Station 3400 Benning Rd. NE Washington DC 20010 Number of Tanks at This Location: <u>1</u> |

| III. Tank Information <small>Complete for each tank. If facility has more than 4 tanks, photocopy page and complete information for additional tanks.</small> | | | | |
|--|--|--------|--------|--------|
| Tank presently in use (circle) | Tank 1 | Tank 2 | Tank 3 | Tank 4 |
| If not, date last used | | | | |
| If emptied, verify 1" or less of product in tank | | | | |
| Month and Year Tank Installed | Jan 1988 | | | |
| Material of Construction tank/pipe | Tank - Steel w/FRP Lin Pipe - Steel Lin | | | |
| Capacity of Tank (in gallons) | 15,000 | | | |
| Substance Stored | Diesel | | | |

| IV.A. Release Detection For Tanks <small>Check the release detection method(s) used for each tank or N/A if none required.</small> | | | | |
|---|---|--|--|--|
| Manual Tank Gauging (tanks under 1,000 gal.) | | | | |
| Manual Tank Gauging and Tank Tightness Testing (tanks under 2,000 gal.) | | | | |
| Tank Tightness Testing and Inventory Control | | | | |
| Automatic Tank Gauging | ✓ | | | |
| Vapor, Groundwater or Interstitial Monitoring | | | | |
| Other approved method (SIR) | | | | |

| IV.B. Release Detection For Piping <small>Check the release detection method(s) used for piping.</small> | | | | |
|---|---|--|--|--|
| Check Pressurized (P) or Suction (S) Piping for each tank | S | | | |
| Automatic Line Leak Detectors, and check one | | | | |
| Vapor or Groundwater Monitoring | | | | |
| Secondary Containment with Monitoring | | | | |
| Line Tightness Testing | ✓ | | | |

I, Andrew W. Loll (print name) certify that I have inspected the above named facility on 6/15/2007 month/day/year

Inspector's Signature: Andrew W. Loll Date: 6/18/2007

Leak Detection for Piping

Pressurized Piping A method must be selected from each set. Where applicable indicate date of last test. If this facility has more than 4 tanks, please photocopy this page and complete information for all additional piping.

| Set 1 | Tank 1 | Tank 2 | Tank 3 | Tank 4 |
|---|--------|--------|--------|--------|
| Automatic Flow Restrictor | | | | |
| Automatic Shut-off Device | | | | |
| Continuous Alarm System | | | | |
| <i>and</i> | | | | |
| Set 2 | | | | |
| Annual Line Tightness Testing | | | | |
| Interstitial Monitoring | | | | |
| If Interstitial Monitoring, documentation of monthly monitoring is available | | | | |
| Ground-Water or Vapor Monitoring | | | | |
| If Ground-Water or Vapor Monitoring, documentation of monthly monitoring is available | | | | |
| Other Approved Method (specify in comments section) | | | | |

Suction Piping. Indicate date of most recent test.

| | | | | |
|--|------------|--|--|--|
| Line Tightness Testing (required every 3 years) | 11/11/2005 | | | |
| Secondary Containment with Interstitial Monitoring | | | | |
| Ground-Water or Vapor Monitoring | | | | |
| Other Approved Method (specify in comments section) | | | | |
| No Leak Detection Required (must answer yes to all of the following questions) | | | | |
| Operates at less than atmospheric pressure | | | | |
| Has only one check valve, which is located directly under pump | | | | |
| Slope of piping allows product to drain back into tank when suction released | | | | |
| All above information on suction piping is verifiable | | | | |

On the back of this sheet, please sketch the site, noting all piping runs, tanks (including size and substances stored) and location of wells and their distance from tanks and piping.

Comments: Suction piping has manual block valves at tank and inside building.
 - Facility conducts line tightness testing every 3 years. The last two tests were 11/11/2005 and 12/17/2002

Inspector's Signature: Andrew W. Jell Date: 6/18/2007

Inventory Control and Tank Tightness Testing

Method of tank tightness testing: N/A

Address of tank tightness tester: _____

Please complete all information for each tank

If this facility has more than 4 tanks, please photocopy this page and complete the information for all additional tanks.

| | Tank 1 | Tank 2 | Tank 3 | Tank 4 |
|--|--------|--------|--------|--------|
| Date of last tank tightness test. | | | | |
| Did tank pass test? Indicate yes or no. If no, specify in comments section below the status of the tank or what actions have been taken (e.g., has state been notified?) | | | | |
| Documentation of deliveries and sales balances with daily measurements of liquid volume in tank are maintained and available. | | | | |
| Overages or shortages are less than 1% + 130 gals of tank's flow-through volume. | | | | |
| If no, which months were not? | | | | |

Please answer yes or no for each question

| | | |
|---|------------------------------|-----------------------------|
| Owner/operator can explain inventory control methods and figures used and recorded. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Records include monthly water monitoring. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Tank inventory reconciled before and after fuel delivery. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Books are reconciled monthly. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Appropriate calibration chart is used for calculating volume. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Dispenser pumps are calibrated to within 6 cubic inches per five gallons. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The drop tube in the fill pipe extends to within one foot of tank bottom. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Owner can demonstrate consistency in dipsticking techniques. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The dipstick is long enough to reach the bottom of the tank. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The ends of the gauge stick are flat and not worn down. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The dipstick is marked legibly & the product level can be determined to the nearest 1/8th inch. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The tank has been tested within the year & has passed the tightness test (if necessary). | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| A third-party certification of the tank tightness test method is available. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Tank tester complied with all certification requirements. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Monitoring and testing are maintained and available for the past 12 months. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Comments: _____

Inspector's Signature: [Signature]

Date: 6/18/2007

Vapor Monitoring *N/A*

Name of monitoring device: _____

Date system installed _____ Number of monitoring wells _____

Distance of monitoring well(s) from tank(s) (1) _____ (2) _____ (3) _____ (4) _____

Site assessment was conducted by: _____

Location of site assessment documentation: _____

Please indicate yes or no for each tank Please complete all information for each tank. If facility has more than 4 tanks please photocopy this page and complete the information for additional tanks.

| | Tank 1 | Tank 2 | Tank 3 | Tank 4 |
|---|--------|--------|--------|--------|
| Well is clearly marked and secured. | | | | |
| Well caps are tight. | | | | |
| Well is constructed so that monitoring device is not rendered inoperative by moisture or other interferences. | | | | |
| Well is free of debris or has other indications that it has been recently checked. | | | | |

Please answer yes or no for each question

| | | | |
|---|------------------------------|-----------------------------|--|
| UST excavation zone was assessed prior to vapor monitoring system installation. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| One or more USTs is/are included in system. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

If the system is automatic, check the following:

| | | | |
|--|------------------------------|-----------------------------|--|
| Power box is accessible and power light is on. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Documentation of monthly readings is available for last 12 months. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Equipment used to take readings is accessible and functional. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Vapor monitoring equipment has been calibrated within the last year. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

If the system is manual, check the following:

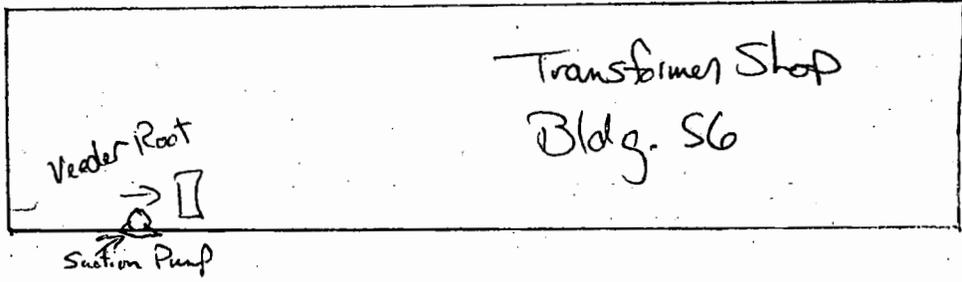
| | | | |
|--|------------------------------|-----------------------------|--|
| Documentation of monthly readings is available for last 12 months. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Equipment used to take readings is accessible and functional. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Vapor monitoring equipment has been calibrated within the last year. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Porous material was used for backfill. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Wells are placed within the excavation zone. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Level of background contamination is known. If so -- what is level? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

On the back of this sheet, please sketch the site, noting all piping runs, tanks (including size and substances stored) and location of wells and their distance from tanks and piping.

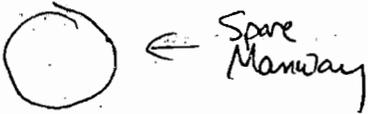
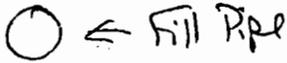
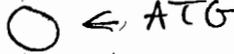
Comments: _____

Inspector's Signature: *Andrew W. Fall* Date: *6/18/07*

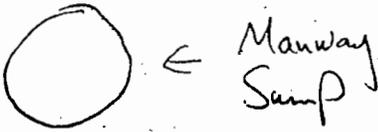
Site Sketch/Photo Log



Cathodic Protection Monitoring Well → Δ



Cathodic Protection Monitoring Well → Δ



Manual Tank Gauging

N/A

Manual tank gauging may be used as the sole method of leak detection only for tanks of 1,000 gal. or fewer or in combination with tank tightness testing for tanks of up to 2,000 gal.

Please indicate the number of the tank or tanks for which manual tank gauging is used as the main leak detection method (e.g., tanks 1 & 4): _____

Please answer yes or no for each question

| | | |
|--|------------------------------|-----------------------------|
| Records show liquid level measurements are taken at beginning and end of period of at least ((Circle one) 36, 44, 58) hours during which no liquid is added to or removed from the tank. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Level measurements are based on average of two consecutive stick readings at both beginning and end of period. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Monthly average of variation between beginning and end measurements is less than standard shown below for corresponding size and dimensions of tank and waiting time. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Gauge stick is long enough to reach bottom of the tank. Ends of gauge stick are flat and not worn down. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Gauge stick is marked legibly and product level can be determined to the nearest one-eighth of an inch. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| MTG is used as sole method of leak detection for tank. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| MTG is used in conjunction with tank tightness testing. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Are all tanks for which MTG is used under 2,000 gallons in capacity? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Are monitoring records available for the last 12 month period? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

| Check One: | Nominal Tank Capacity (in gallons) | Tank Dimensions | Monthly Standard (in gallons) | Minimum Test Duration |
|------------|------------------------------------|----------------------------|-------------------------------|-----------------------|
| () | 110-550 | N/A | 5 | 36 hours |
| () | 551 - 1,000* | N/A | 7 | 36 hours |
| () | 1,000* | 64" diameter x 73" length | 4 | 44 hours |
| () | 1,000* | 48" diameter x 128" length | 6 | 58 hours |
| () | 1,001 - 2,000* | N/A | 13 | 36 hours |

* Manual tank gauging must be used in combination with tank tightness testing for tanks over 550 gal. and up to 2,000 gal.

Comments: _____

Inspector's Signature: *[Handwritten Signature]*

Date: *6/18/2007*

Ground Water Monitoring *N/A*

Date System Installed: _____

Distance of well from tank(s) (1) _____ (2) _____ (3) _____ (4) _____

Distance of well from piping (1) _____ (2) _____ (3) _____ (4) _____

Site assessment was conducted by: _____

Location of site assessment documentation: _____

Please answer each question of each well If there are more than 4 wells, please photocopy this page and complete the information for all additional wells.

| | Well 1 | Well 2 | Well 3 | Well 4 |
|--|--------|--------|--------|--------|
| Well is clearly marked and secured to avoid unauthorized access or tampering. | | | | |
| Well was opened and presence of water was observed in well at depth of _____ ft. | | | | |

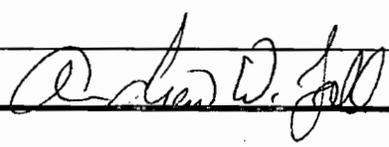
Please answer yes or no for each question

| | | |
|--|------------------------------|-----------------------------|
| Wells are used to monitor piping. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Site assessment was performed prior to installation of wells. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Documentation of monthly readings is available. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Specific gravity of product is less than one. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Hydraulic conductivity of soil between UST system and monitoring wells is not less than 0.01 cm/sec. According to: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Groundwater is not more than 20 feet from ground surface. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Wells are sealed from the ground surface to top of filter pack. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Continuous monitoring device or manual bailing method used can detect the presence of at least one-eighth of an inch of the product on top of groundwater in well. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Groundwater is monitored: () Manually on a monthly basis. () Automatically (continuously or monthly basis [Circle one]). | | |
| Check the following if groundwater is monitored <u>manually</u> : Bailer used is accessible and functional. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Check the following if groundwater is monitored <u>automatically</u> : Monitoring box is operational. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Checked for presence of sensor in monitoring well. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

On the back of this sheet, please sketch the site, noting all piping runs, tanks (including size and substances stored) and location of wells and their distance from tanks and piping.

Comments: _____

Inspector's Signature: _____



Date: _____

6/18/2007

Interstitial Monitoring *N/A*

Manufacturer and name of system: _____

Date system installed: _____

Materials used for secondary barrier: _____

Materials used for internal lining: _____

Interstitial space is monitored (Circle one): automatically, continuously, monthly basis.

Please answer yes or no for each question

| | | | |
|--|------------------------------|-----------------------------|------------------------------|
| All tanks in system are fitted with secondary containment and interstitial monitoring. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| System is designed to detect release from any portion of UST system that routinely contains product. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Monitoring method is documented as capable of detecting a leak as small as .1 gal./hr. with at least a 95% probability of detection and a probability of false alarm of no more than 5%. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Documentation of monthly readings is available for last 12 months. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Maintenance and calibration documents and records are available and indicate appropriate maintenance procedures for system have been implemented. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Monitoring box, if present, is operational. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| If monitoring wells are part of leak detection system, monitoring wells are clearly marked and secured to avoid unauthorized access and tampering. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Interstitial space is monitored manually on monthly basis (answer the following question). | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Equipment used to take readings is accessible and functional. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Tank is double-walled | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Tank is fitted with internal bladder to achieve secondary containment (answer the following question). | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Bladder is compatible with substance stored and will not deteriorate in the presence of that substance. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Excavation is lined with impervious artificial material to achieve secondary containment (answer the following questions). | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Secondary barrier is always above groundwater. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| If secondary barrier is not always above groundwater, secondary barrier and monitoring designs are for use under such _____ conditions. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Secondary barrier is constructed from artificially constructed material, with permeability to substance < 10 ⁸ cm/sec. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Secondary barrier is compatible with the regulated substances stored and will not deteriorate in presence of that substance. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Secondary barrier does not interfere with operation of cathodic protection system. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |

Comments: _____

Inspector's Signature: *Robert D. Jell* Date: 6/18/2007

Automatic Tank Gauging

Manufacturer, name and model number of system: Weeder Root TCS-300C

Please answer yes or no for each question

| | | |
|--|---|-----------------------------|
| Device documentation is available at site (e.g., manufacturer's brochures, owner's manual). | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Device can measure height of product to nearest one-eighth of an inch. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Documentation shows that water in bottom of tank is checked monthly to nearest one-eighth of an inch. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Documentation is available that the ATG was in test mode a minimum of once a month. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Checked for presence of gauge in tanks. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Checked for presence of monitoring box and evidence that device is working (i.e., device is equipped with roll of paper for results documentation). | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Owner/operator has documentation on file verifying method meets minimum performance standards of .20 gph with probability of detection of 95% and probability of false alarm of 5% for automatic tank gauging (e.g., results sheets under EPA's "Standard Test Procedures for Evaluating Leak Detection Methods"). | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Checked documentation that system was installed, calibrated, and maintained according to manufacturer's instructions. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Maintenance records are available upon request. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Monthly testing records are available for the past 12 months. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Daily monitoring records are available for the past 12 months (if applicable). | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Comments: Facility provided ATG and Leak Detection Records for each of the last 13 months.

Inspector's Signature: *Charles W. Zell* Date: 6/18/2007

Statistical Inventory Reconciliation N/A

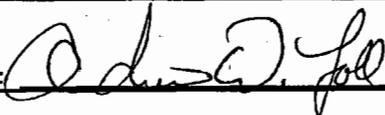
Please complete all information for each tank If this facility has more than 4 tanks, please photocopy this page and complete the information for all additional tanks.

| | | | | |
|---|--|--|--|--|
| Documentation of deliveries and sales balances with daily measurements of liquid volume in tank are maintained and available. | | | | |
|---|--|--|--|--|

Please answer yes or no for each question

| | | |
|---|------------------------------|-----------------------------|
| Records include monthly water monitoring. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Tank inventory reconciled before and after fuel delivery. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Appropriate calibration chart is used for calculating volume. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Dispenser pumps are calibrated to within 6 cubic inches per five gallons. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The drop tube in the fill pipe extends to within one foot of tank bottom. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Answer one of the following three: | | |
| 1) Owner can demonstrate consistency in dipsticking techniques. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| a) The dipstick is long enough to reach the bottom of the tank. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b) The end of the gauge stick is flat and not worn down. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| c) The dipstick is legible & the product level can be determined to the nearest 1/8th inch. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <i>OR</i> | | |
| 2) Automatic tank gauge is used for readings. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <i>OR</i> | | |
| 3) Other method is used for readings (explain in comment section below). | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| A third-party certification of the SIR method is available. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Monitoring and testing records are maintained and available for the past 12 months. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Comments: _____

Inspector's Signature:  Date: 6/18/2007

Spill/Overfill Prevention

| | Tank 1 | Tank 2 | Tank 3 | Tank 4 |
|---|---|--|--|--|
| Are all tank transfers less than 25 gallons? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Spill Prevention | | | | |
| Is there a spill bucket (at least 5 gallons) or another device that will prevent release of product to the environment (such as a dry disconnect coupling)? | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Overfill Prevention | | | | |
| What device is used to prevent tank from being overfilled? | | | | |
| Ball float valve | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Butterfly valve (in fill pipe) | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Automatic alarm monitoring is used | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Other alarm system | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

DOES THE FACILITY HAVE A FINANCIAL ASSURANCE MECHANISM? YES NO (PROVIDE COMMENTS AS TO COMPLIANCE STATUS FOR 40 C.F.R. PART 280 SUBPART H.)

Cathodic Protection

| | Tank 1 | Tank 2 | Tank 3 | Tank 4 |
|--|---|--|--|--|
| Sacrificial Anode System | | | | |
| Test results show a negative voltage of at least 0.85 Volts (using the tank and a copper/copper sulfate cell)? | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| The last two test results are available. (Tests are required every three years.) | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Impressed Current | | | | |
| Rectifier is on 24 hours a day? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| The last two test results are available? (Tests are required every 60 days.) | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Test results show a negative voltage of at least 0.85 Volts (using the tank and a copper/copper sulfate cell)? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Comments: Insured through Associated Electric & Gas Insurance Services Limited.

Policy # X2660A1A06.

The last CP testing was completed on 3/26/2007. Both test points showed the potential greater than -0.85 Volts (passing).

Inspector's Signature: *Andrew G. Zell*

Date: 6/18/2007

Attachment 2. Photo Log

Washington, DC

PHOTO LOG

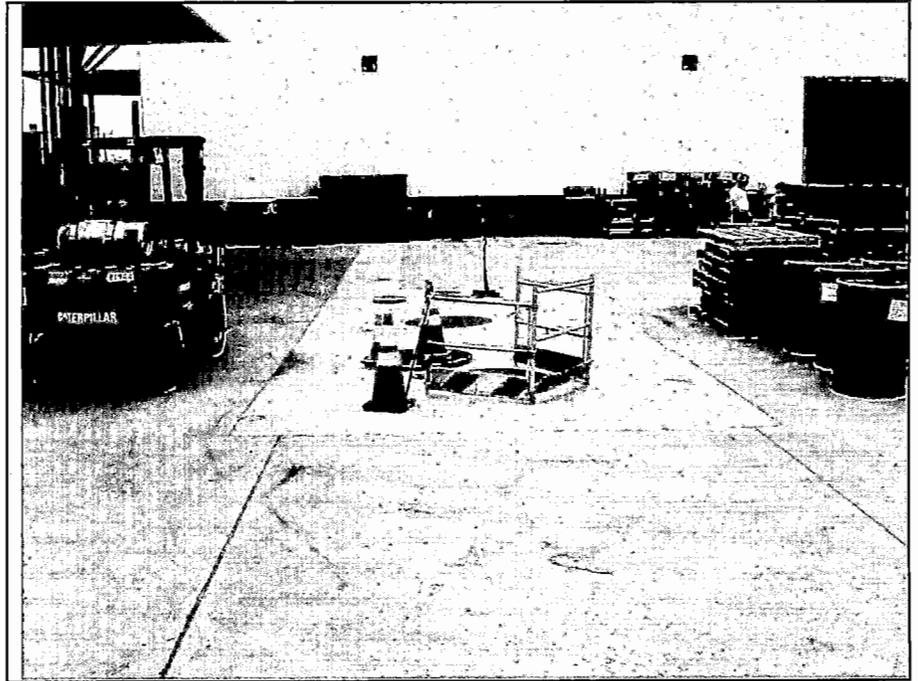
DATE TAKEN: 6/15/07

TAKEN BY: A. Loll

SITE LOCATION: View of Transformer Station UST looking north.

PHOTO #: 1

COMMENTS: Site overview:
Transformer oil UST.



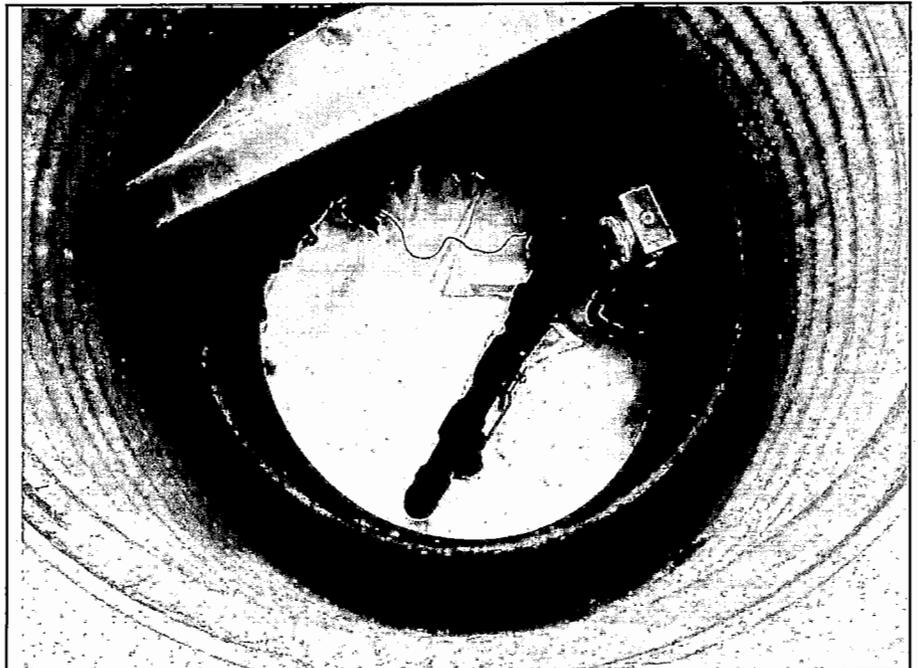
DATE TAKEN: 6/15/07

TAKEN BY: A. Loll

SITE LOCATION: View of Transformer Station UST.

PHOTO #: 2

COMMENTS: Transformer oil
UST manway sump.



Washington, DC PHOTO LOG

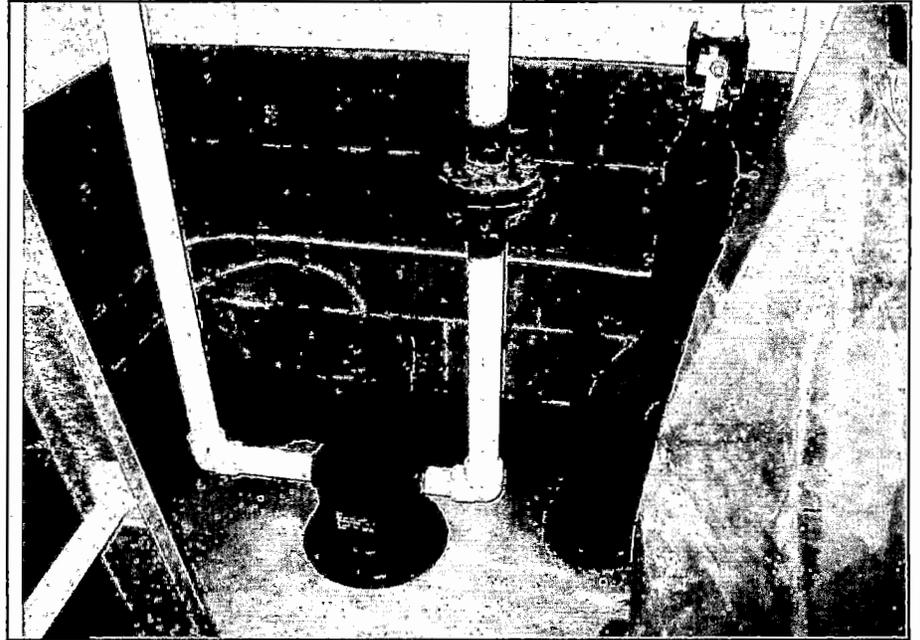
DATE TAKEN: 6/15/07

TAKEN BY: A. Loll

SITE LOCATION: View of Transformer Station UST.

PHOTO #: 3

COMMENTS: UST piping supplies transformer cooling oil for filling reconditioned transformers.



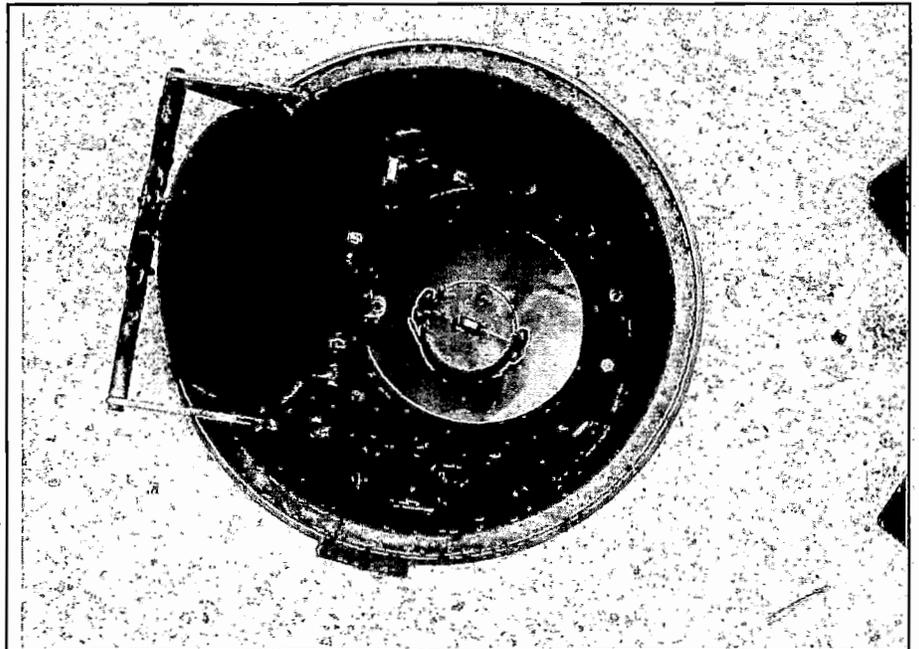
DATE TAKEN: 6/15/07

TAKEN BY: A. Loll

SITE LOCATION: View of Transformer Station UST.

PHOTO #: 4

COMMENTS: Transformer oil UST fill pipe.



Attachment 3. ATG Inventory and Leak Detection Testing Reports

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
JUN 10. 2006 7:55 PM

TEST LENGTH 4 HOURS,

T 1:TRANS. OILH
VOLUME = 7625 GALS
ULLAGE = 7488 GALS
90% ULLAGE= 5976 GALS
TC VOLUME = 7605 GALS
HEIGHT = 63.46 INCHES
STK HEIGHT= 67.46 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 65.4 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
JUN 10. 2006 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

JUN 10. 2006 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
JUN 10. 2006 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 7641.0 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

***** END *****

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
JUL 15, 2006 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 6777 GALS
ULLAGE = 8336 GALS
90% ULLAGE= 6824 GALS
TC VOLUME = 6747 GALS
HEIGHT = 57.92 INCHES
STK HEIGHT= 61.92 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 69.1 DEG F

***** END *****

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
JUL 15, 2006 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

JUL 15, 2006 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
JUL 15, 2006 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 6846.3 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

***** END *****

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
AUG 12, 2006 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 6583 GALS
ULLAGE = 9530 GALS
90% ULLAGE= 7018 GALS
TC VOLUME = 6550 GALS
HEIGHT = 56.64 INCHES
STK HEIGHT= 57.52 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 70.4 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
AUG 12, 2006 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

AUG 12, 2006 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
AUG 12, 2006 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 6645.1 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
SEP 9. 2006 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 5943 GALS
ULLAGE = 9170 GALS
90% ULLAGE= 7658 GALS
TC VOLUME = 5908 GALS
HEIGHT = 52.42 INCHES
STK HEIGHT= 53.30 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 72.4 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
SEP 9. 2006 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

SEP 9. 2006 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
SEP 9. 2006 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 6020.8 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

DELIVERY

AFTER

STICK
DROPP

88 3/8"

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

OCT 11, 2006 9:57 AM

SYSTEM STATUS REPORT

ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:TRANS. OILH
VOLUME = 11219 GALS
ULLAGE = 3894 GALS
90% ULLAGE= 2382 GALS
TC VOLUME = ~~11164~~ GALS
HEIGHT = 87.57 INCHES
STK HEIGHT= 88.44 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 70.4 DEG F

***** END *****

BEFORE

STICK
DROPP
48"

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

OCT 12, 2006 8:34 AM

SYSTEM STATUS REPORT

T 1:LOW PRODUCT ALARM

T 1:DELIVERY NEEDED

INVENTORY REPORT

T 1:TRANS. OILH
VOLUME = 5153 GALS
ULLAGE = 9960 GALS
90% ULLAGE= 8448 GALS
TC VOLUME = ~~5122~~ GALS
HEIGHT = 47.14 INCHES
STK HEIGHT= 48.01 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 72.4 DEG F

***** END *****

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
OCT 14, 2006 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 11159 GALS
ULLAGE = 3954 GALS
90% ULLAGE= 2442 GALS
TC VOLUME = 11099 GALS
HEIGHT = 87.14 INCHES
STK HEIGHT= 88.02 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 71.4 DEG F

***** END *****

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
OCT 14, 2006 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

OCT 14, 2006 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
OCT 14, 2006 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 8117.5 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

***** END *****

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
NOV 11. 2006 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 10549 GALS
ULLAGE = 4564 GALS
90% ULLAGE= 3052 GALS
TC VOLUME = 10500 GALS
HEIGHT = 82.89 INCHES
STK HEIGHT= 83.76 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 70.0-DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
NOV 11. 2006 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

NOV 11. 2006 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
NOV 11. 2006 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME =10621.0 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
DEC 9. 2006 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 10178 GALS
ULLAGE = 4935 GALS
90% ULLAGE= 3423 GALS
TC VOLUME = 10142 GALS
HEIGHT = 80.35 INCHES
STK HEIGHT= 81.22 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.3 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
DEC 9. 2006 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

DEC 9. 2006 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
DEC 9. 2006 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 10179.2 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

* * * * * END * * * * *

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
JAN 13. 2007 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 9789 GALS
ULLAGE = 5324 GALS
90% ULLAGE= 3812 GALS
TC VOLUME = 9768 GALS
HEIGHT = 77.72 INCHES
STK HEIGHT= 78.60 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 64.5 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
JAN 13. 2007 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

JAN 13. 2007 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
JAN 13. 2007 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 9784.0 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
FEB 10. 2007 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 8662 GALS
ULLAGE = 6451 GALS
90% ULLAGE= 4939 GALS
TC VOLUME = 8654 GALS
HEIGHT = 70.24 INCHES
STK HEIGHT= 71.12 INCHES
WATER VOL. = 0 GALS
WATER = 0.00 INCHES
TEMP = 61.9 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
FEB 10. 2007 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

FEB 10. 2007 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
FEB 10. 2007 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 8706.5 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
MAR 10. 2007 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 8106 GALS
ULLAGE = 7007 GALS
90% ULLAGE= 5495 GALS
TC VOLUME = 8108 GALS
HEIGHT = 66.60 INCHES
STK HEIGHT= 67.48 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 59.2 DEG F

***** END *****

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
MAR 10. 2007 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

MAR 10. 2007 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
MAR 10. 2007 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 8177.7 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

***** END *****

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
APR 14. 2007 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 7433 GALS
ULLAGE = 7680 GALS
90% ULLAGE= 6168 GALS
TC VOLUME = 7431 GALS
HEIGHT = 62.21 INCHES
STK HEIGHT= 63.09 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 60.6 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
APR 14. 2007 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

APR 14. 2007 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
APR 14. 2007 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 7497.2 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

* * * * * END * * * * *

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
MAY 12. 2007 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 6757 GALS
ULLAGE = 8356 GALS
90% ULLAGE= 6844 GALS
TC VOLUME = 6750 GALS
HEIGHT = 57.79 INCHES
STK HEIGHT= 58.66 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 62.2 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
MAY 12. 2007 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

MAY 12. 2007 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
MAY 12. 2007 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 6891.1 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

START IN-TANK LEAK TEST
TEST BY PROGRAMMED TIME
JUN 9. 2007 7:55 PM

TEST LENGTH 4 HOURS

T 1:TRANS. OILH
VOLUME = 6502 GALS
ULLAGE = 8611 GALS
90% ULLAGE= 7099 GALS
TC VOLUME = 6487 GALS
HEIGHT = 56.11 INCHES
STK HEIGHT= 56.98 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 64.6 DEG F

* * * * * END * * * * *

STOP IN-TANK LEAK TEST
T 1:TRANS. OILH
JUN 9. 2007 9:55 PM

PEPCO
BENNING RD
WASHINGTON DC
202-388-2357

JUN 9. 2007 9:55 PM

LEAK TEST REPORT

T 1:TRANS. OILH
PROBE SERIAL NUM 671667

MOST RECENT AVERAGED
TEST STARTING TIME:
JUN 9. 2007 7:55 PM

AVG LENGTH = 2.0 HRS
AVG VOLUME = 6518.2 GAL

AVG LEAK TEST RESULTS
0.20 GAL/HR TEST PASS

* * * * * END * * * * *

Attachment 4. Veeder-Root Monitoring Certification Summary

K & G PETROLEUM SERVICES, INC.

200 Sandhill Court St. Leonard, MD. 20685-2598

Phone 410-495-8100 ~ Fax 410-495-7888

July 22, 2006

George Hume
PEPCO Benning Transformer Shop
3400 Benning Rd. N.E.
Bldg. 56
Washington, D.C. 20019

RE: INSPECTION OF THE TRANSFORMER SHOP VEEDER ROOT TLS 300C TANK MONITORING SYSTEM

Dear Dan:

This is to certify that on July 19, 2006 the TLS 300 C monitoring system was tested for accuracy of operation.

The Veeder Root TLS 300 C control panel is programmed to activate an audible alarm if product or water is detected in the interstice of the tank by the annular space sensor.

The annular space sensor, located in the interstice of the tank, was removed and placed in water. The alarm was activated at the TLS 300 C control panel indicating that the sensor is in good operating condition and an alarm report printed.

The system set up parameters were printed and verified to be correct.

The inventory report was printed and compared to the actual stick reading that was taken at the UST. The leak test report and liquid status was also printed.

All functions of the system checked out o.k. except the probe cable which needs to be replaced. The reading was showing 1-1/2" more product than the actual level.

Sincerely,



Keith Griffin
K & G Petroleum Services, Inc.
Advanced Technician

Attachment 5. Line Tightness Testing Results

For Use With

Petro Air

DATE 11/11/05

STATION NUMBER

1 LOCATION: Pepeca 2600 Benning Rd. N.E

2 OWNER: _____

3 OPERATOR: _____

4 REASON FOR TEST: regulatory

5 TEST REQUESTED BY: Mr. Hume

6 SPECIAL INSTRUCTIONS: transformer oil

7 CONTRACTOR OR COMPANY MAKING TEST: PETRO SUPPLY, INC. Brian Arye

8 IS A TANK TEST TO BE MADE WITH THIS LINE TEST? YES NO

9 MAKE AND TYPE OF PUMP OR DISPENSER (SUCTION OR SUBMERSIBLE): section system

10 WEATHER: clear 70° TEMPERATURE IN TANKS: _____ °F _____ °C COVER OVER LINES: Concrete APPROXIMATE BURIAL DEPTH: 50"

| 11 IDENTIFY EACH LINE AS TESTED | 12 TIME (MILITARY) | 13 LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC. | 14 PRESSURE | | 15 VOLUME | | 16 REMARKS | |
|---------------------------------|--------------------|---|-------------|-------|-----------|-------|----------------------------------|------------|
| | | | BEFORE | AFTER | BEFORE | AFTER | | NET CHANGE |
| Oil | 8:30 | START TEST | | 10 | | | 000 GALLONS PER HOUR tight | |
| | 8:45 | Test#1 | 10 | 10 | .067 | .067 | | 000 |
| | 9:00 | Test#2 | 10 | 10 | .067 | .067 | | 000 |
| | 9:15 | Test#3 | 10 | 10 | .067 | .067 | | 000 |
| | 9:30 | Test#4 | 10 | 10 | .067 | .067 | | 000 |
| | | Bleedback Pressure | | 010 | | | | |
| PLUS | | START TEST | | | | | GALLONS PER HOUR | |
| | | Test#1 | | | | | | |
| | | Test#2 | | | | | | |
| | | Test#3 | | | | | | |
| | | Test#4 | | | | | | |
| | | Bleedback Pressure | | | | | | |
| SUPER | | START TEST | | | | | GALLONS PER HOUR | |
| | | Test#1 | | | | | | |
| | | Test#2 | | | | | | |
| | | Test#3 | | | | | | |
| | | Test#4 | | | | | | |
| | | Bleedback Pressure | | | | | | |
| DIESEL | | START TEST | | | | | GALLONS PER HOUR | |
| | | Test#1 | | | | | | |
| | | Test#2 | | | | | | |
| | | Test#3 | | | | | | |
| | | Test#4 | | | | | | |
| | | Bleedback Pressure | | | | | | |

TEST RESULTS

Tests were made on the above line systems in accordance with test procedures prescribed for as detailed on attached test charts with the results as follows:

| Line Identification | Meets Criteria | Net Volume Change Per Hour | Date Tested |
|---------------------|----------------|----------------------------|-------------|
| oil | tight | 000 | 11/11/05 |

17 CONTRACTOR CERTIFICATION.

Technician: Brian Arye

15,170 gal transformer oil 45T.

DATA CHART
For Use With

JAN 14 2003

DATE 12/17/02

STATION NUMBER

1 LOCATION Pepco 3400 Benning Rd. N.E. D.C.

2 OWNER Pepco

3 OPERATOR Pepco

4 REASON FOR TEST D.C. Regulations

5 TEST REQUESTED BY Pepco

6 SPECIAL INSTRUCTIONS suction system, Double wall.

7 CONTRACTOR OR COMPANY MAKING TEST MECHANICS) NAME: PETRO SUPPLY, INC. E.H. Burke, Jr.

8 IS A TANK TEST TO BE MADE WITH THIS LINE TEST? YES NO

9 MAKE AND TYPE OF PUMP OR DISPENSERS (SUCTION OR SUBMERSIBLE) suction

10 WEATHER cloudy 40 TEMPERATURE IN TANKS 40 °C 40 °C COVER OVER LINES Concrete APPROXIMATE BURIAL DEPTH 36"

| 11 IDENTIFY EACH LINE AS TESTED | 12 TIME (MILITARY) | 13 LOG OF TEST PROCEDURE, AMBIENT TEMPERATURE, WEATHER ETC. | 14 PRESSURE (PSI OR KPa) | | 15 VOLUME READING | | 16 REMARKS SIZE, LENGTH & TYPE OF LINE, FLEX CONNECTORS, CONCLUSIONS, REPAIRS AND COMMENTS |
|---------------------------------|--------------------|---|--------------------------|-------|-------------------|-------|---|
| | | | BEFORE | AFTER | BEFORE | AFTER | |
| Trans. oil | 10:45 | START TEST | | 40 | | | |
| | 11:00 | TEST #1 | 40 | 40 | 051 | 051 | 000 |
| | 11:15 | TEST #2 | 41 | 40 | 051 | 052 | 7.001 |
| | 11:30 | TEST #3 | 40 | 40 | 052 | 052 | 000 |
| | 11:45 | TEST #4 | 40 | 40 | 052 | 052 | 000 |
| | | BLEEDBACK PRESSURE | | 038 | | | |
| PLUS | | START TEST | | | | | |
| | | TEST #1 | | | | | |
| | | TEST #2 | | | | | |
| | | TEST #3 | | | | | |
| | | TEST #4 | | | | | |
| | | BLEEDBACK PRESSURE | | | | | |
| SUPER | | START TEST | | | | | |
| | | TEST #1 | | | | | |
| | | TEST #2 | | | | | |
| | | TEST #3 | | | | | |
| | | TEST #4 | | | | | |
| | | BLEEDBACK PRESSURE | | | | | |
| DIESEL | | START TEST | | | | | |
| | | TEST #1 | | | | | |
| | | TEST #2 | | | | | |
| | | TEST #3 | | | | | |
| | | TEST #4 | | | | | |
| | | BLEEDBACK PRESSURE | | | | | |

7.001
GALLONS PER HOUR
tight

GALLONS PER HOUR

GALLONS PER HOUR

GALLONS PER HOUR

TEST RESULTS

Tests were made on the above line systems in accordance with test procedures prescribed for as detailed on attached test charts with the results as follows:

| Line Identification | Make & Model | Net Volume Change Per Hour | Date Tested |
|---------------------|--------------|----------------------------|-------------|
| Trans. oil | tight | 7.001 | 12/17/02 |

17 CONTRACTOR CERTIFICATION

E.H. Burke, Jr.

Attachment 6. Cathodic Protection Testing Results



T & D TEST WORK ASSIGNMENT

DATE: 3/26/2007

| | | |
|-----------------------------|--------------------------|------------------------------|
| WREQUEST NUM: 3187310 | FEEDER NUMBER: | REPORTEDBY: X142ROA |
| WONUM: 71776 | PHASE: | REPORTED BY DATE: 03/26/2007 |
| LOCATION: DISTRIBUTION TEST | GRID NUMBER: | WORKTYPE: |
| SUPERVISOR DOHERTYTB | GL ACCOUNT: 142195846.12 | STATUS: INPRG |
| LEADCRAFT: GILCHRISTHL | JOB PLAN: TDT-CRST | STATUS DATE: 03/26/2007 |

CUSTOMER NAME: TRANSFORMER SHOP
 STREET ADDRESS: 3400 BENNING RD
 CITY, STATE, ZIP: NE
 JURISDICTION:
 CUSTOMER PHONE: DC
 CIS TEXT:

FAILURECODE CRST
 PROBLEM:
 CAUSE:
 ADDITIONAL PROBLEM:
 ADC MAP CODE:
 WOPRIORITY 3
 LABOR HOURS/JOB: 0

WORK ORDER DESCRIPTION:

CORROSION TEST/Perform survey on Transformer Shop Oil Tanks - See attached sheets for details

LONG DESCRIPTION: ATTN !!! *** See H. Eversole before attending !***

INSPECTOR REPORT: *test station*

2 296-1.1

test station

1 1-23

COPY TO HUME

| | | |
|--------------------------|----------------------------------|---------------------------------------|
| TARGET START DATE: | TARGET COMPLETATION DATE: | |
| ASSIGNED: <u>3/26/07</u> | DATE ATTENDED: <u>3/27/07</u> | DATE TESTER COMPLETED: <u>3/27/07</u> |
| MH/JOB: _____ | COMPLETED BY: <i>[Signature]</i> | DATE JOB COMPLETED: <u>1/1</u> |
| | | SUPERVISOR: _____ |



T & D TEST WORK ASSIGNMENT

DATE 6/2004

| | | | |
|------------------------------|------------------------|-------------------|------------|
| WREQUEST NUM: 103114 | FEEDER NUMBER: | REPORTED BY: | AIKEN |
| WONUM: 2114 | PHASE: | REPORTED BY DATE: | 06/01/2004 |
| LOCATION: DISTRIBUTION DIST: | GRID NUMBER: | WORK TYPE: | |
| SUPERVISOR: DOUGLTYD: | GL ACCOUNT: 1011124632 | STATUS: | INFO |
| LEAD CRAFT: 447/300131P | JOB PLAN: TDI CRST | STATUS DATE: | 06/01/2004 |

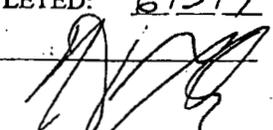
CUSTOMER NAME: TRANSFORMER SHOP
STREET ADDRESS: 3400 BENNING RD
CITY, STATE, ZIP: NE
JURISDICTION: DC
CUSTOMER PHONE:
CIS TEXT:
WORK ORDER DESCRIPTION:
 TRANSFORMER CORROSION TEST/RETEST OIL TANK

FAILURE CODE: CRST
PROBLEM:
CAUSE:
ADDITIONAL PROBLEM:
ADC MAP CODE:
WOPRIORITY: 3
LABOR HOURS/JOB: 0

LONG DESCRIPTION:

INSPECTOR REPORT: *Test station #1 1.23vg*
Test station #2 1.31vg
Copy to Mr. Hume.

JUN 03 2004


TARGET START DATE:
ASSIGNED: 6/3/4 **DATE ATTENDED:** 6/3/4 **TARGET COMPLETION DATE:**
MH/JOB: _____ **DATE TESTER COMPLETED:** 6/3/4 **DATE JOB COMPLETED:** / /
COMPLETED BY:  **SUPERVISOR:** _____

Attachment 7. Proof of Financial Assurance

ASSOCIATED ELECTRIC & GAS INSURANCE SERVICES LIMITED

Endorsement No. 35A Effective Date of Endorsement October 31, 2006

Attached to and forming part of POLICY No. X2660A1A06

NAMED INSURED Peppo Holdings, Inc.

It is understood and agreed that this POLICY is hereby amended as indicated. All other terms and conditions of this POLICY remain unchanged.

UNDERGROUND STORAGE TANK FINANCIAL RESPONSIBILITY ENDORSEMENT

DECLARATIONS

- Item UST1: A. Name of each covered location:
(See Section 3)
- B. Address of each covered location:
(See Section 3)
- Item UST2: Policy Number: X2660A1A06
- Item UST3: Period of coverage: October 31, 2006 to October 31, 2007
- Item UST4: A. Name of Insurer: Associated Electric & Gas Insurance Services Limited
- B. Address of Insurer: One Church Street, P.O. Box HM2455, Hamilton, HMJX BERMUDA
- Item UST5: A. Name of Insured: Potomac Electric Power Company
- B. Address of Insured:
701 Ninth Street, N.W.
Washington, DC 20068

INSURING AGREEMENT

1. This Endorsement certifies that the POLICY to which the Endorsement is attached provides liability insurance covering the underground storage tank(s) listed in Section 3 to this Endorsement for taking corrective action and/or compensating third parties for BODILY INJURY and PROPERTY DAMAGE caused by accidental release; in accordance with and subject to the limits of liability, exclusions, conditions, and other terms of the POLICY; arising from operating the underground storage tanks identified Section 3.

The limits of liability of the Insurer's liability are:

\$1,000,000 each OCCURRENCE; and

\$3,000,000 annual aggregate exclusive of legal defense costs, which are subject to a separate limit under the POLICY.

**UNDERGROUND STORAGE TANK FINANCIAL
RESPONSIBILITY ENDORSEMENT**

This coverage is provided under POLICY No. X2660A1A06
The effective date of said POLICY is October 31, 2006

2. The insurance afforded with respect to such OCCURRENCES is subject to all of the terms and conditions of the POLICY; provided, however, that any provisions inconsistent with subsections (a) through (e) of this Paragraph 2 are hereby amended to conform with subsections (a) through (e):
 - a. Bankruptcy or insolvency of the INSURED shall not relieve the Insurer of its obligations under the POLICY to which this Endorsement is attached.
 - b. The Insurer is liable for the payment of amounts within any deductible applicable to the POLICY to the provider of corrective action or a damaged third-party, with a right of reimbursement by the INSURED for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated under another mechanism or combination of mechanisms as specified in 40 CFR 280.95 - 280.102.
 - c. Whenever requested by a Director of an implementing agency, the Insurer agrees to furnish to the Director a signed duplicate original of the POLICY and all endorsements.
 - d. Cancellation or any other termination of the insurance by the Insurer except for nonpayment of premium or misrepresentation by the INSURED will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the INSURED. Cancellation for nonpayment of premium or misrepresentation by the INSURED will be effective only upon written notice and only after expiration of a minimum of ten (10) days after a copy of such written notice is received by the INSURED.
 - e. The insurance covers CLAIMS otherwise covered by the POLICY that are reported to the Insurer within six months of the effective date of cancellation or non-renewal of the POLICY except where the new or renewed POLICY has the same retroactive date or a retroactive date earlier than that of the prior POLICY, and which arise out of any covered OCCURRENCE that commenced after the POLICY retroactive date, if applicable, and prior to such POLICY renewal or termination date. CLAIMS reported during such extended reporting period are subject to the terms, conditions, limits, including Limits of Liability, and exclusions of the POLICY.

3.

| <u>Name of Covered Location</u> | <u>Address</u> | <u>Number of Tanks</u> |
|----------------------------------|---|------------------------|
| Buzzard Point Generating Station | 1st and V Street, SW Washington, D.C. 20024 | 9 |
| Benning Generating Station | 3400 Benning Road, NE Washington, D.C. 20019 | 14 |
| Howatt Building | 1620 2nd Street, SW Washington, D.C. 20006 | 1 |
| Champlain Substation | 2119 Champlain Street, NW Washington, D.C. 20008 | 1 |
| Van Ness Substation | 4000 Van Ness Street Washington, D.C. 20016 | 1 |
| Irving Substation | 1032 Irving Street, NE Washington, D.C. 20018 | 1 |

**UNDERGROUND STORAGE TANK FINANCIAL
RESPONSIBILITY ENDORSEMENT**

| <u>Name of Covered Location</u> | <u>Address</u> | <u>Number of Tanks</u> |
|---------------------------------------|---|------------------------|
| Alabama Avenue Substation | 3302 15th Street, SE Washington, D.C. 20020 | 1 |
| <u>MARYLAND</u> | | |
| Dickerson Generating Station | 21200 Martinsburg Road Dickerson, MD 20753 | 1 |
| Chalk Point Generating | Eagle Harbor Road Aquasco, MD 20608 | 11 |
| Defense Mapping Agency | 6500 Brooks Lane Washington, D.C. and Sangamore Lane Glen Echo, MD | 1 |
| Morgantown Generating Station | P.O. Box Newburg, MD 29795 | 5 |
| Forestville Production Service Center | 8711 Westphalia Road Upper Marlboro, MD 20772 | 7 |
| Bethesda Substation | 4935 Del Ray Avenue Bethesda, MD 20814 | 1 |
| Brighton Substation | 1300 Brighton Dam Road Brighton, MD 20833 | 1 |
| Possom Point Substation | 19000 Brighton Dam Road Dumfries, MD 22026 | 1 |
| Palmers Corner Substation | 3001 Tucker Road Oxon Hill, MD 20744 | 1 |
| Quince Orchard Substation | 1701 Darnestown Road Germantown, MD 20874 | 1 |
| Bells Mill Substation | 10611 Westlake Drive Rockville, MD 20817 | 4 |
| Oak Grove Substation | 3132 Brown Station Road Upper Marlboro, MD 20772 | 1 |

**UNDERGROUND STORAGE TANK FINANCIAL
RESPONSIBILITY ENDORSEMENT**

| <u>Name of Covered Location</u> | <u>Address</u> | <u>Number of Tanks</u> |
|----------------------------------|---|------------------------|
| Norbeck Substation | 16610 Emory Lane Rockville, MD 20853 | 1 |
| Bowie Substation | Jericho Park & Lemmons St. Rds. Jericho Park, MD 20715 | 1 |
| Burches Hills Substation | 8101 Surrats Road Clinton, MD 20735 | 2 |
| Rockville Service Center | 1600 Gaither Road Rockville, MD 20850 | 5 |
| <u>VIRGINIA</u> | | |
| Potomac River Generating Station | 1400 North Royal Street Alexander, VA 22314 | 4 |

I hereby certify that the wording of this instrument is identical to the wording in 40 CFR 280.97 (b) (1) and that the Insurer is eligible to provide insurance as an excess or surplus lines insurer in one or more States.

AEGIS Insurance Services, Inc.
Authorized Representative of:
Associated Electric & Gas Insurance Services Limited
1 Meadowlands Plaza
East Rutherford, New Jersey 07073

Signature of Authorized Representative